DoD/VA Clinical Practice Guideline (CPG) Post-Deployment Health (PDH) Evaluation and Management "Tool Kit"

Health Policy and Services
Outcomes Management Section
Quality Management Division
US Army Medical Command
Ft Sam Houston, TX
(210) 221-6527 DSN 471-6527
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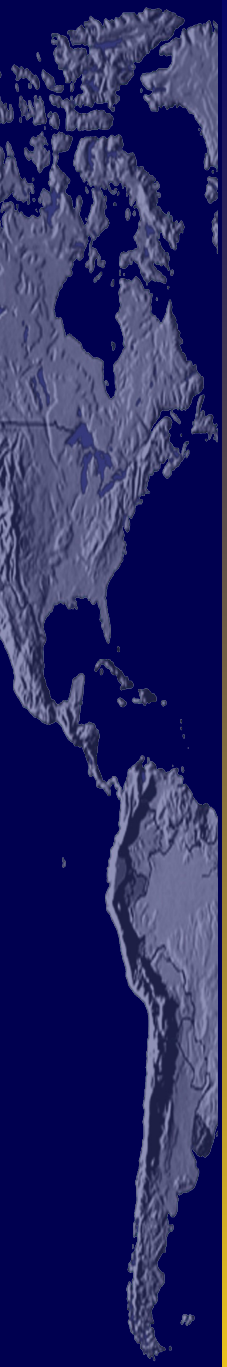
www.QMO.amedd.army.mil

June 2004



Background for Creating CPG "Tool Kits"

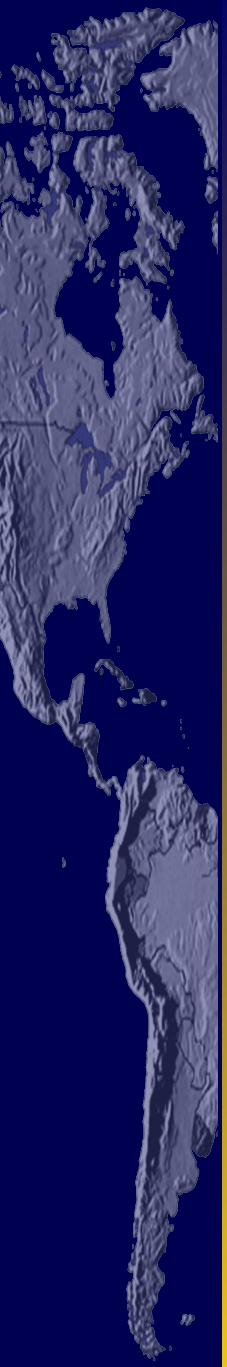
Strategy for supporting changes in practice

- Tools can relieve barriers to change
- Periodic review of tools allow changes in system process
- Tools provide systematic method for measuring progress in improving processes and outcomes of care

Centrally evaluate and produce resources (MEDCOM and CHPPM) that can be replicated across all MTF's

- Prevents the need to 'reinvent the wheel' at each MTF
- Standardization is easier for patients and staff who move within the DoD (MTF's often treat triservice members)

Practice Support Strategies



Clinician Education

- Satellite Broadcast with CME training on the CPG & 'tools'
- Additional training as appropriate (e.g., Risk Communication for PDH)

Patient Education

- Encourages patient's active role in care
- Improves patient satisfaction and compliance (dissatisfied patients tend to dis-enroll and be non-compliant with medical recommendations)

Decision Supports

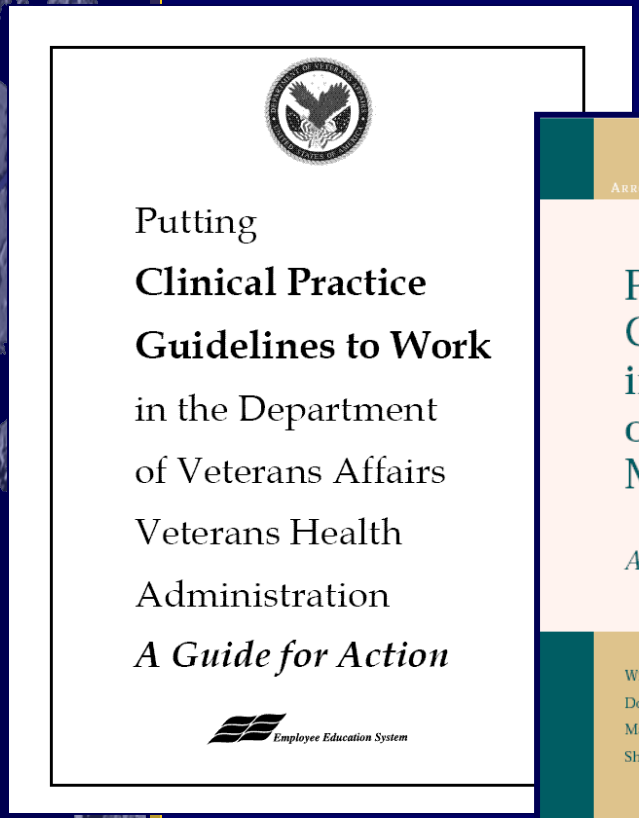
- Reminder systems (e.g. screening question on SF600)
- Form design (reminder system for busy providers who may infrequently see this type of patient)
- Design of work (e.g., personnel designated for specific jobs, change CHCS defaults, referral process, etc.)

DoD/VA PDH CPG Tool Kit

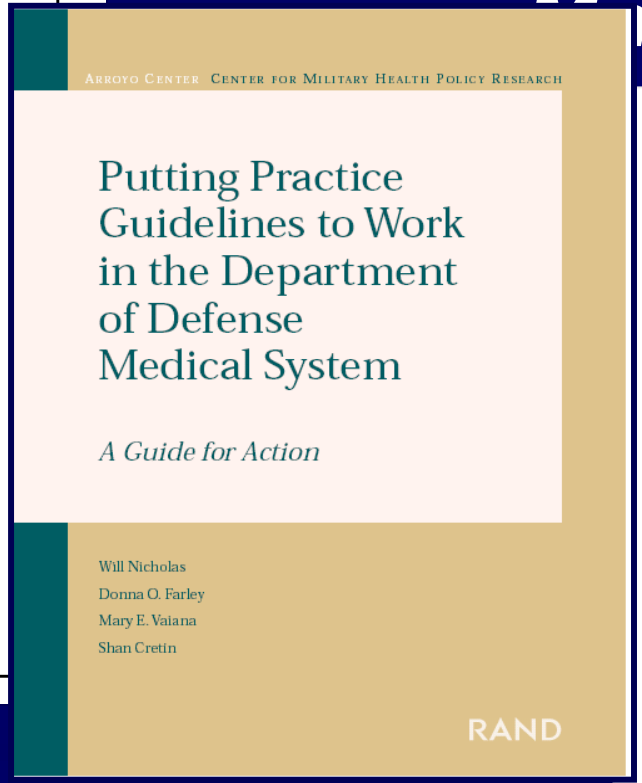
- Three-ring Binder
  - Narrative CPGs (PDH and MUS)
  - Related Assessments and Questionnaires
  - Screening/Documentation Form DD 2844
  - Implementation Guides, Worksheets and Metrics
- Provider Reminder Cards on Ring
- Recipe Card Style Desk Top Tool Kit
  - Deployment Health Clinical Center (DHCC) Info/POCs
  - MDD. PTSD, PDH, MUS and NBC Info Cards
  - CD-ROM - DHCC Slide Presentations
  - CD-ROM - VA/DoD CPGs
- Reference Resources and Related Web Sites

DoD/VA PDH CPG Tool Kit

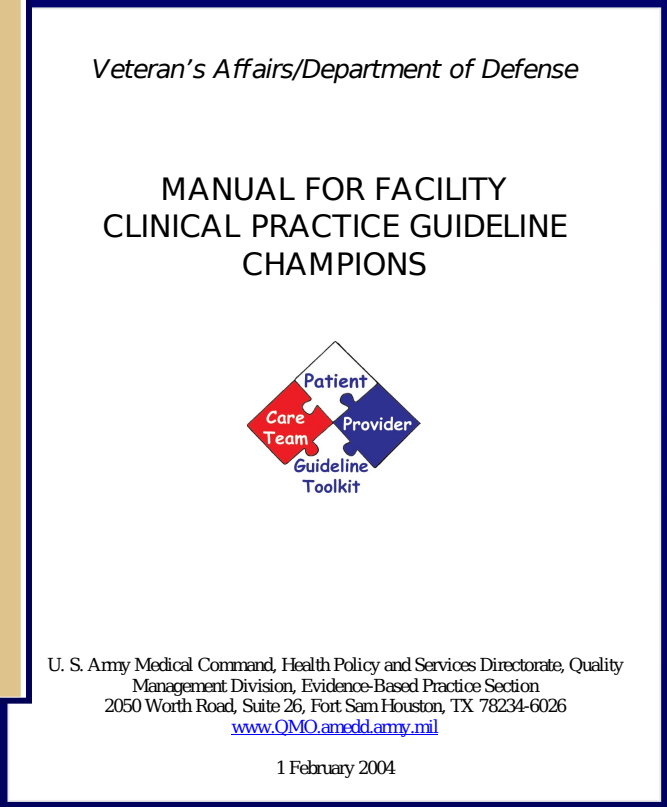
Guideline Champion Implementation Manuals



VA Implementation Manual


Arroyo Center Center for Military Health Policy Research
Putting Practice Guidelines to Work in the Department of Defense Medical System
A Guide for Action
Will Nicholas
Donna O. Farley
Mary E. Vaiana
Shan Cretin
RAND

RAND Implementation Manual

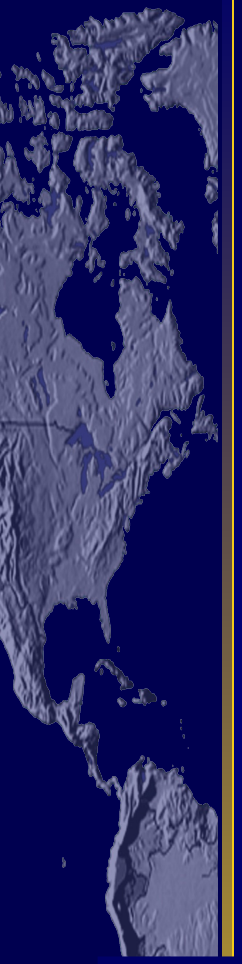


DoD Implementation

DoD/VA PDH CPG Tool Kit

Recipe Box Style Desk Top Tool Kit

8” x 5”



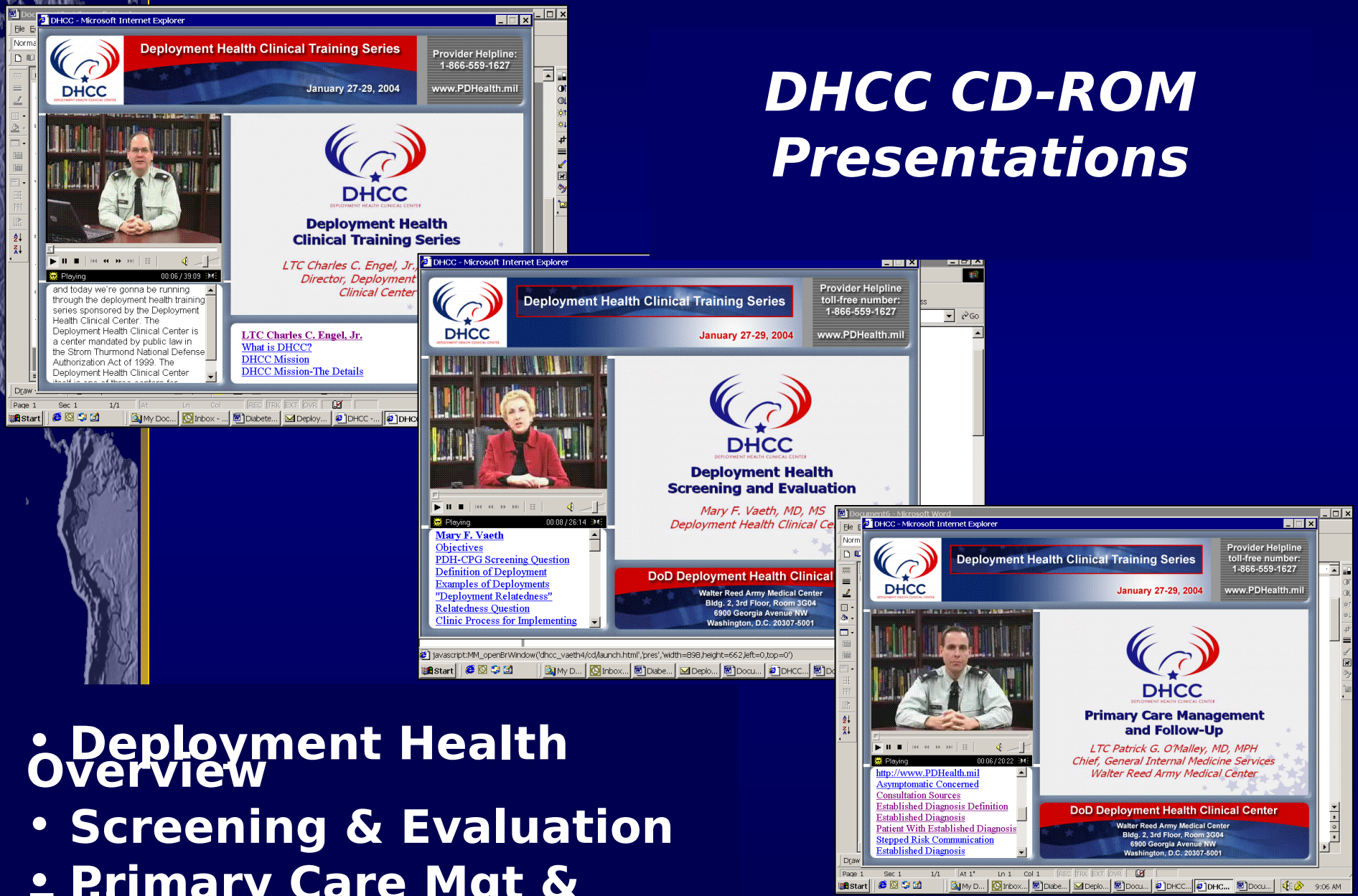
DoD/VA PDH CPG Tool Kit

Currently Being Developed. . .

- ***Provider Info Cards - PDH, MUS, MDD, NBC, and PTSD***
- ***2 CD-ROMS: DHCC Slide presentations and all VA/DoD CPGs***

DoD/VA PDH CPG Tool Kit

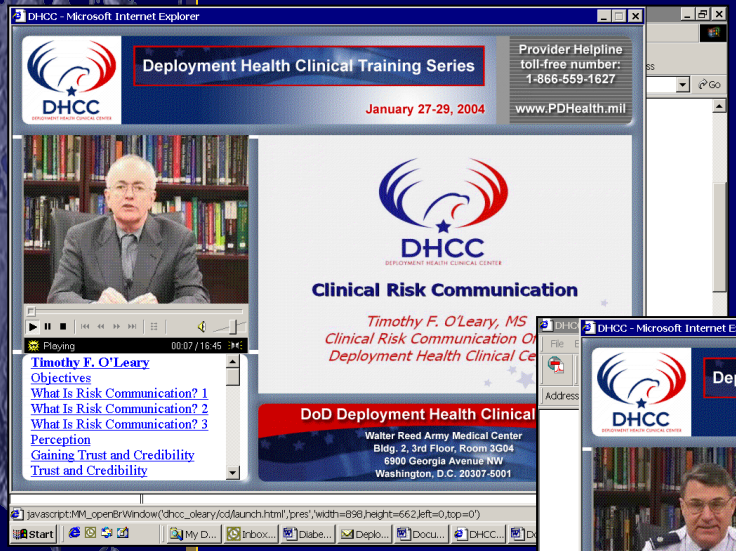
DHCC CD-ROM Presentations

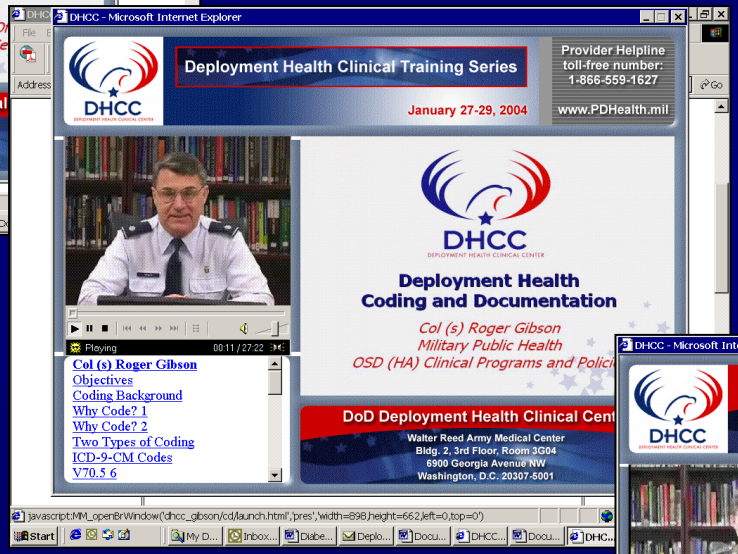

DHCC - Microsoft Internet Explorer
Deployment Health Clinical Training Series
January 27-29, 2004
Provider Helpline: 1-866-559-1627
www.PDHealth.mil
DHCC
Deployment Health Clinical Training Series
LTC Charles C. Engel, Jr.
Director, Deployment Clinical Center
and today we're gonna be running through the deployment health training series sponsored by the Deployment Health Clinical Center. The Deployment Health Clinical Center is a center mandated by public law in the Strom Thurmond National Defense Authorization Act of 1999. The Deployment Health Clinical Center
LTC Charles C. Engel, Jr.
What is DHCC?
DHCC Mission
DHCC Mission-The Details
Deployment Health Clinical Training Series
January 27-29, 2004
Provider Helpline toll-free number: 1-866-559-1627
www.PDHealth.mil
Deployment Health Screening and Evaluation
Mary F. Vaeth, MD, MS
Mary F. Vaeth
Objectives
PDH-CPG Screening Question
Definition of Deployment
Examples of Deployments
"Deployment Relatedness"
Relatedness Question
Clinic Process for Implementing
DoD Deployment Health Clinical
Walter Reed Army Medical Center
Bldg. 2, 3rd Floor, Room 3G04
6900 Georgia Avenue NW
Washington, D.C. 20307-5001
Primary Care Management and Follow-Up
LTC Patrick G. O'Malley, MD, MPH
Chief, General Internal Medicine Services
Walter Reed Army Medical Center
http://www.PDHealth.mil
Asymptomatic Concerned
Consultation Sources
Established Diagnosis Definition
Established Diagnosis
Patient With Established Diagnosis
Stepped Risk Communication
Established Diagnosis
DoD Deployment Health Clinical Center

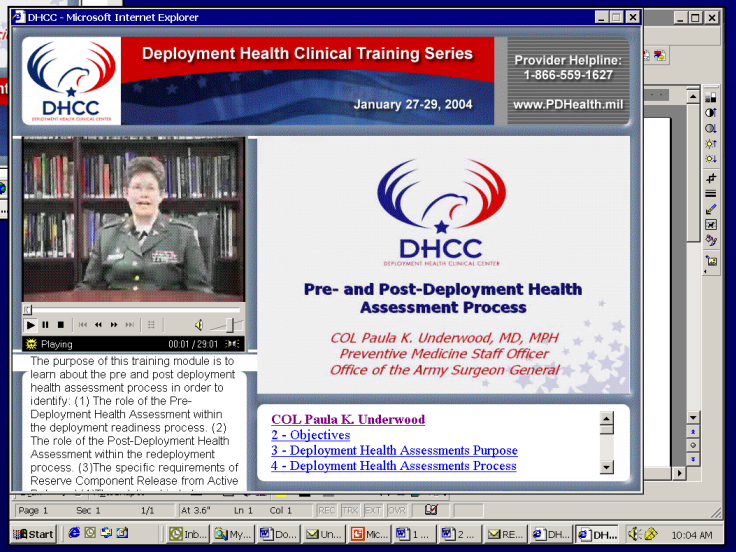
- Deployment Health Overview
- Screening & Evaluation
- Primary Care Mgt &

DoD/VA PDH CPG Tool Kit

DHCC CD-ROM Presentations






DHCC - Microsoft Internet Explorer
Deployment Health Clinical Training Series
January 27-29, 2004
Provider Helpline: 1-866-559-1627
www.PDHealth.mil
DHCC
Pre- and Post-Deployment Health Assessment Process
COL Paula K. Underwood, MD, MPH
Preventive Medicine Staff Officer
Office of the Army Surgeon General
The purpose of this training module is to learn about the pre and post deployment health assessment process in order to identify: (1) The role of the Pre-Deployment Health Assessment within the deployment readiness process. (2) The role of the Post-Deployment Health Assessment within the redeployment process. (3)The specific requirements of Reserve Component Release from Active
COL Paula K. Underwood
2 - Objectives
3 - Deployment Health Assessments Purpose
4 - Deployment Health Assessments Process

- Risk Communication
- Coding & Documentation
- Pre & Post Health Assessment

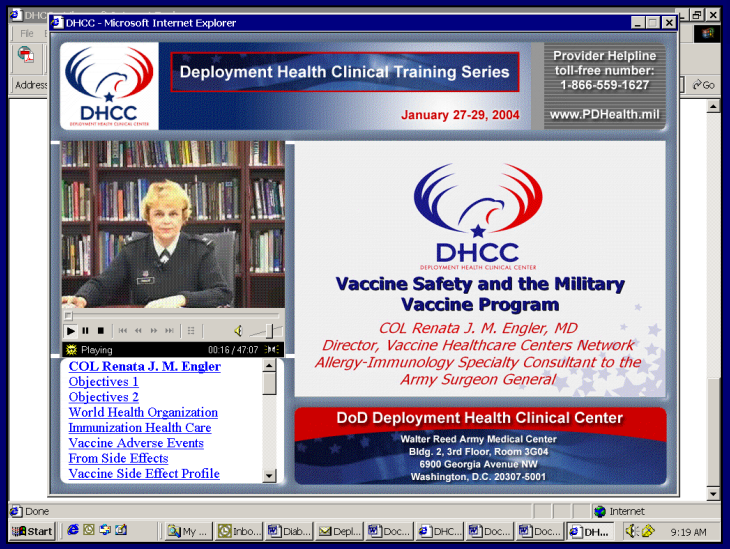
DoD/VA PDH CPG Tool Kit

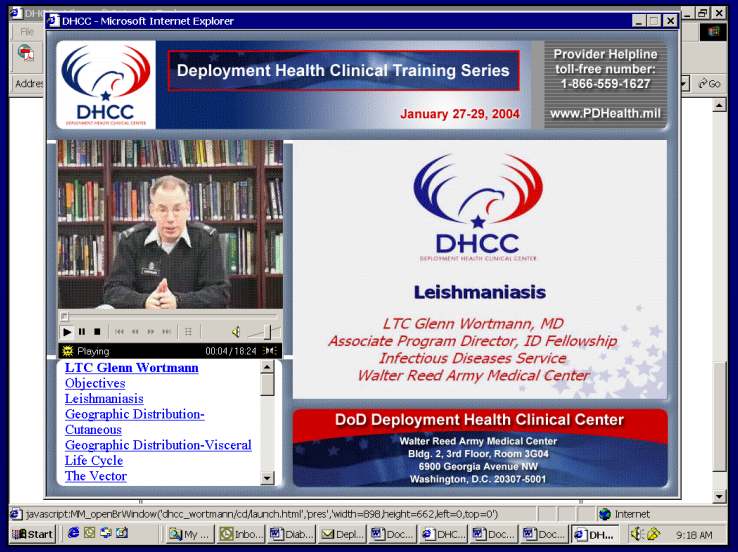
DHCC CD-ROM Presentations

- Suicide
- Malaria Prevention
- Depleted Uranium Exposures

DoD/VA PDH CPG Tool Kit

DHCC CD-ROM Presentations

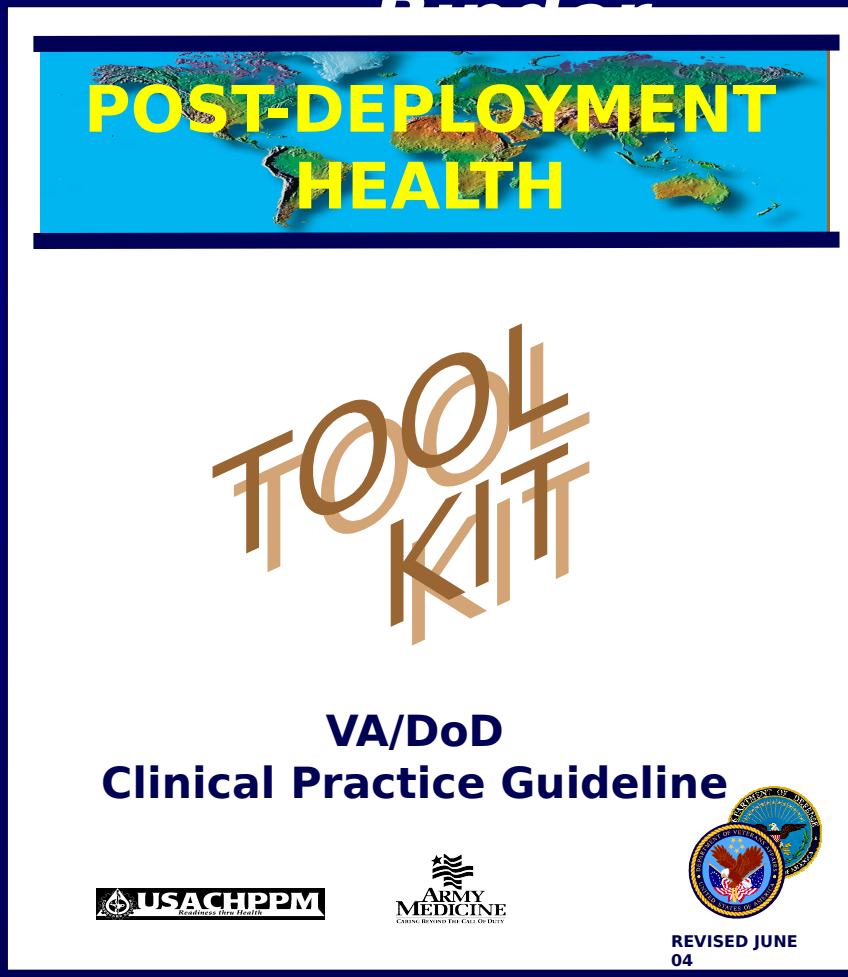




- Vaccine Safety & the Military
  Vaccine Program
- Leishmaniasis

DoD/VA PDH CPG Tool Kit

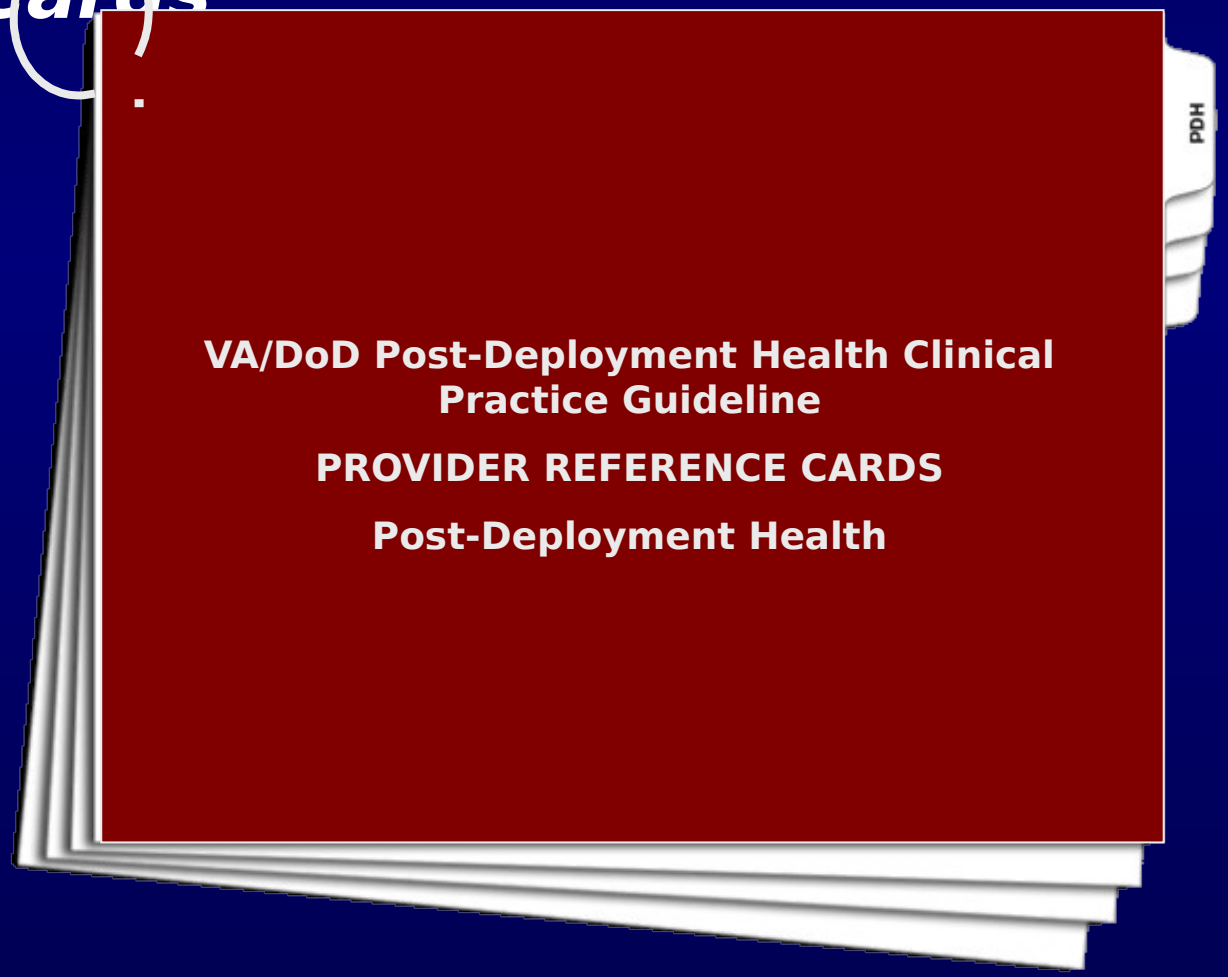
Provider Tools: PDH/MUS



DoD/VA PDH CPG Tool Kit

Provider Tools:

Provider Reminder Cards



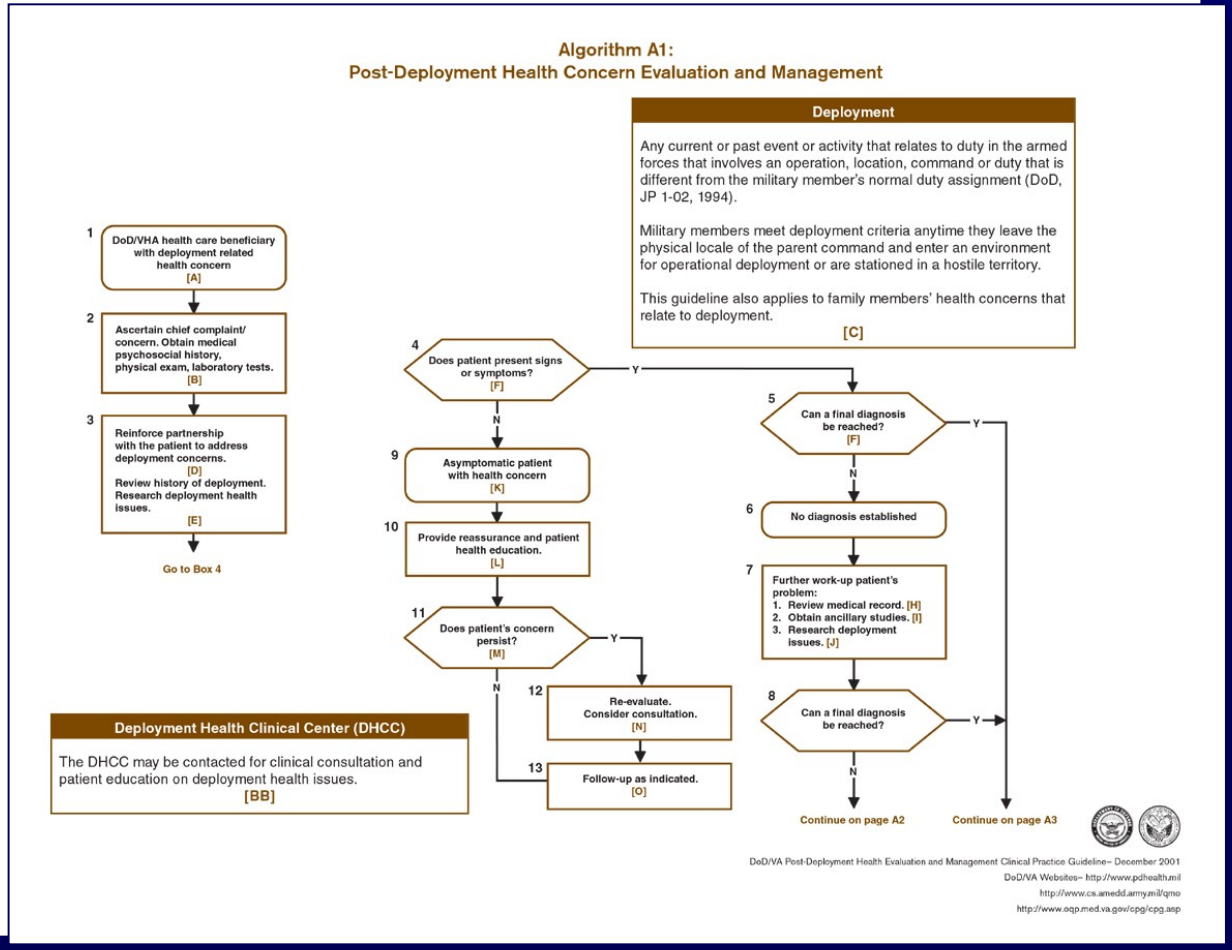
DoD/VA PDH CPG Tool Kit

Provider Reminder Cards: Algorithms

A1: Asymptomatic Concerned

A2: Management of Patient with Medically unexplained Physical Symptoms

A3: Management of Patient with established diagnosis



Algorithm A1:
Post-Deployment Health Concern Evaluation and Management

Deployment

Any current or past event or activity that relates to duty in the armed forces that involves an operation, location, command or duty that is different from the military member's normal duty assignment (DoD, JP 1-02, 1994).

Military members meet deployment criteria anytime they leave the physical locale of the parent command and enter an environment for operational deployment or are stationed in a hostile territory.

This guideline also applies to family members' health concerns that relate to deployment.

[C]

1 DoD/VHA health care beneficiary with deployment related health concern [A]

2 Ascertain chief complaint/ concern. Obtain medical psychosocial history, physical exam, laboratory tests. [B]

3 Reinforce partnership with the patient to address deployment concerns. [D]
Review history of deployment. Research deployment health issues. [E]

Go to Box 4

4 Does patient present signs or symptoms? [F]

Y → 5 Can a final diagnosis be reached? [F]

Y → Continue on page A3

N → 6 No diagnosis established

7 Further work-up patient's problem:
1. Review medical record. [H]
2. Obtain ancillary studies. [I]
3. Research deployment issues. [J]

8 Can a final diagnosis be reached?

Y → Continue on page A3

N → Continue on page A2

N → 9 Asymptomatic patient with health concern [K]

10 Provide reassurance and patient health education. [L]

11 Does patient's concern persist? [M]

Y → 12 Re-evaluate. Consider consultation. [N]

N → 13 Follow-up as indicated. [O]

Deployment Health Clinical Center (DHCC)

The DHCC may be contacted for clinical consultation and patient education on deployment health issues. [BB]

DoD/VA Post-Deployment Health Evaluation and Management Clinical Practice Guideline– December 2001
DoD/VA Websites– http://www.pdhealth.mil
http://www.cs.amedd.army.mil/qmo
http://www.oqp.med.va.gov/cpg/cpg.asp

DoD/VA PDH CPG Tool Kit

Provider Reminder Cards: Key Elements

DoD/VA Post-Deployment Health Evaluation and Management Clinical Practice Guideline
PROVIDER REFERENCE CARD
Key Elements

Identify if health concerns are related to deployment (first visit)
- Ask screening questions: ***Deployment related? Yes/No/Maybe.***
- Evaluate patient and research exposures.
- Establish partnership with patient (risk communication).
- Document post-deployment concern in chart and code ADS.

Triage patients and seek to reach a working diagnosis (follow-up visit)
- Perform evaluation of history, ancillary tests, assessments, records.
- Identify the type of patient's problem:
  - Asymptomatic with concern (algorithm box 13).
  - Un-explained symptoms (algorithm box 19).
  - Established diagnosis for the concern (algorithm box 34).

Manage asymptomatic patients with health concerns
- Provide reassurance and education (risk communication).
- If concern persists, re-evaluate and consider consults.

Manage patients with unexplained symptoms
- Re-evaluate data; consult with colleagues.
- Reinforce patient-clinician relationship.
- Information about unexplained symptoms.
- If acute or progressive symptoms, do additional ancillary studies.
- Consider specialty consults.
- Follow-up with patient as indicated.
- Monitor changes in status.

Manage patients with established diagnosis
- Document diagnosis.
- Identify appropriate disease management guideline.
- Initiate appropriate treatment plan.
- Provide patient education.
- Collaborate with DHCC as indicated.
- Follow-up with patient per disease-specific guideline or as appropriate.

DoD/VA PDH CPG Tool Kit

Provider Reminder Cards: Clinic Visit Guidance

Deployment Health Concerns Information Card

How to ask the question: "Is your problem today related to a deployment?"

Focus only on the chief complaint rather than on whether a person has **any** deployment-related complaints unrelated to today's visit.

Deployment is not necessary for a patient to have deployment-related health concerns.

- For example, a spouse or child may have a concern related to the sponsor's recent deployment. Others may have questions about deployments.
- Ask this question whether the patient is active duty, retired, family member, veteran, deployed or non-deployed.

How to respond to patient questions.

"What do you mean?" or "What do you mean, deployment-related?" The goal is to record the patient's perception of deployment-relatedness rather than your own.

- To help the patient answer, you might ask if the patient or a loved one has been deployed. If so, is today's visit related to that deployment.
- You may also review an example or two of a deployment-related concern or condition (see below).
- Remember this is not an exhaustive list, but simply a few examples.

"What is a deployment?" Avoid reviewing any narrow definitions of deployment for the patient. Instead, offer two or three examples of deployments (see below). Then return to the main question: "Do you feel your health concern today is related to a deployment?"

"I don't know if it is deployment-related." Mark the "maybe" response. Consider reviewing an example of a deployment-related concern or condition (see below).

- When in doubt, always focus on the concern rather than the deployment.

Examples of deployments include:

- Military liaison and training support
- Humanitarian assistance
- Low-intensity conflict
- Peacekeeping
- Joint or coalition force exercises
- Combat/War

Examples within the US include:

- Fighting forest fires
- Maintaining civil order
- Construction projects
- Providing disaster relief
- Drug interdiction

Examples of concerns or conditions that are deployment-related include:

- A man twists his ankle on deployment and the injury lasts even after returning home.
- A woman comes to give blood, but wants to know if she can give blood after being deployed.
- Although not deployed, a man is concerned about the effects of a pre-deployment vaccine.
- Spouse complains of a rash after washing clothes worn by member while deployed.
- After eating food while deployed, a man gets food poisoning.
- While deployed, a woman suffers a toxic exposure and later gets sick from it.
- Spouse complains that her child is having nightmares since member returned from combat.

DoD/VA Post-Deployment Health Evaluation and Management Clinical Practice Guideline– December 2001
DoD/VA Websites– http://www.pdhealth.mil
http://www.cs.amedd.army.mil/qmo
http://www.oqp.med.va.gov/cpg/cpg.asp

DoD/VA PDH CPG Tool Kit

Provider Reminder Cards: Quality Targets and Risk Communication

Currently Being Developed. . .

DoD/VA PDH CPG Tool Kit

Provider Reminder Cards: DHCC Resources and Contact Information

Currently Being Developed. . .

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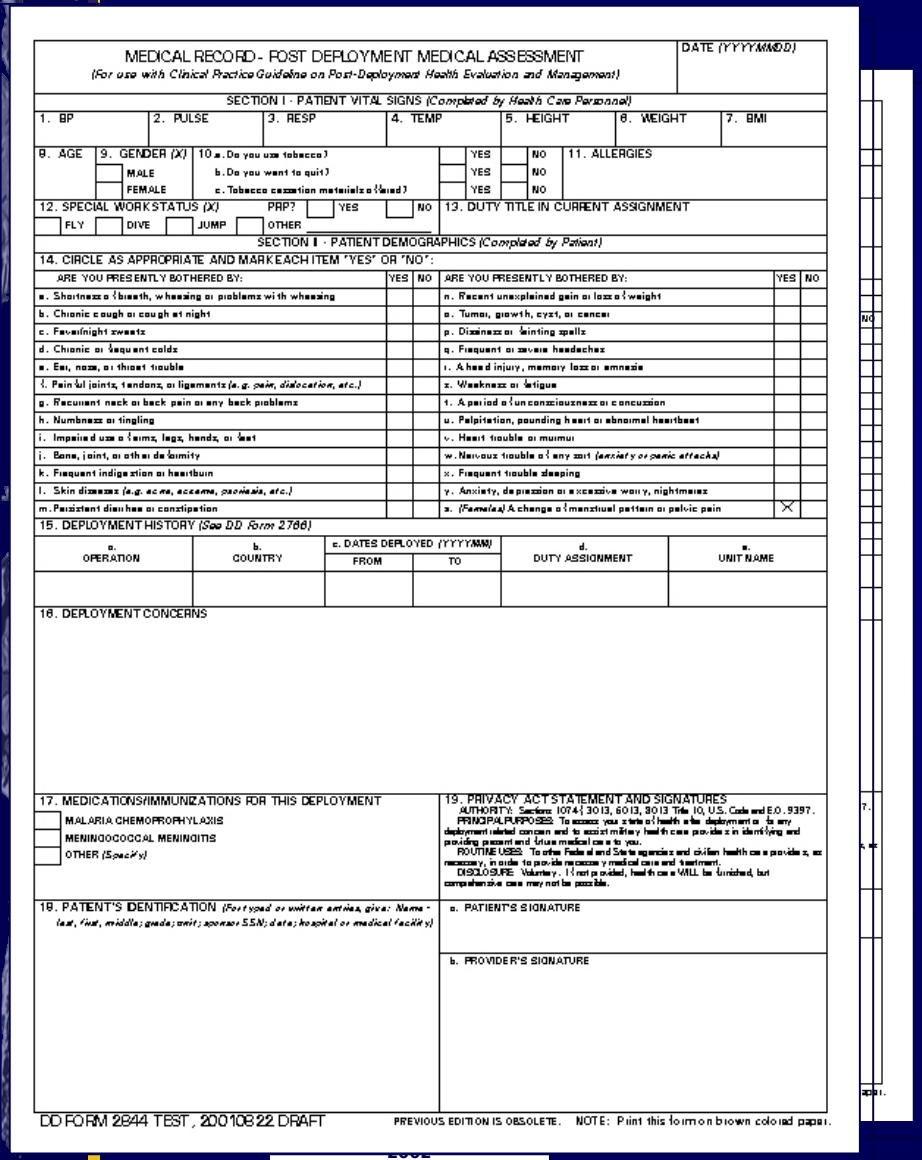
Provider Reminder Cards: ICD-9-CM Codes

Currently Being Developed. . .

DoD/VA PDH CPG Tool Kit



MEDICAL RECORD - POST DEPLOYMENT MEDICAL ASSESSMENT
(For use with Clinical Practice Guideline on Post-Deployment Health Evaluation and Management)

DATE *(YYYYMMDD)*

SECTION I - PATIENT VITAL SIGNS *(Completed by Health Care Personnel)*

1. BP	2. PULSE	3. RESP	4. TEMP	5. HEIGHT	6. WEIGHT	7. BMI

8. AGE | 9. GENDER *(X)*: MALE, FEMALE | 10 a. Do you use tobacco? YES NO | b. Do you want to quit? YES NO | c. Tobacco cessation materials offered? YES NO | 11. ALLERGIES

12. SPECIAL WORK STATUS *(X)*: FLY, DIVE, JUMP, OTHER _____ PRP? YES NO | 13. DUTY TITLE IN CURRENT ASSIGNMENT

SECTION II - PATIENT DEMOGRAPHICS *(Completed by Patient)*

14. CIRCLE AS APPROPRIATE AND MARK EACH ITEM "YES" OR "NO":

ARE YOU PRESENTLY BOTHERED BY:	YES	NO	ARE YOU PRESENTLY BOTHERED BY:	YES	NO
a. Shortness of breath, wheezing or problems with wheezing			n. Recent unexplained gain or loss of weight		
b. Chronic cough or cough at night			o. Tumor, growth, cyst, or cancer		
c. Fever/night sweats			p. Dizziness or fainting spells		
d. Chronic or frequent colds			q. Frequent or severe headaches		
e. Ear, nose, or throat trouble			r. A head injury, memory loss or amnesia		
f. Painful joints, tendons, or ligaments *(e.g. pain, dislocation, etc.)*			s. Weakness or fatigue		
g. Recurrent neck or back pain or any back problems			t. A period of unconsciousness or concussion		
h. Numbness or tingling			u. Palpitation, pounding heart or abnormal heartbeat		
i. Impaired use of arms, legs, hands, or feet			v. Heart trouble or murmur		
j. Bone, joint, or other deformity			w. Nervous trouble of any sort *(anxiety or panic attacks)*		
k. Frequent indigestion or heartburn			x. Frequent trouble sleeping		
l. Skin diseases *(e.g. acne, eczema, psoriasis, etc.)*			y. Anxiety, depression or excessive worry, nightmares		
m. Persistent diarrhea or constipation			z. *(Females)* A change of menstrual pattern or pelvic pain	X	

15. DEPLOYMENT HISTORY *(See DD Form 2766)*

a. OPERATION	b. COUNTRY	c. DATES DEPLOYED *(YYYYMM)* FROM	TO	d. DUTY ASSIGNMENT	e. UNIT NAME

16. DEPLOYMENT CONCERNS

17. MEDICATIONS/IMMUNIZATIONS FOR THIS DEPLOYMENT
- MALARIA CHEMOPROPHYLAXIS
- MENINGOCOCCAL MENINGITIS
- OTHER *(Specify)*

19. PRIVACY ACT STATEMENT AND SIGNATURES
AUTHORITY: Sections 1074, 3013, 5013, 8013 Title 10, U.S. Code and E.O. 9397.
PRINCIPAL PURPOSES: To access your status of health after deployment as to any deployment-related concern and to assist military health care providers in identifying and providing present and future medical care to you.
ROUTINE USES: To other Federal and State agencies and civilian health care providers, as necessary, in order to provide necessary medical care and treatment.
DISCLOSURE: Voluntary. If not provided, health care will be furnished, but comprehensive care may not be possible.

18. PATIENT'S IDENTIFICATION *(For typed or written entries, give: Name - last, first, middle; grade; unit; sponsor SSN; date; hospital or medical facility)*

a. PATIENT'S SIGNATURE

b. PROVIDER'S SIGNATURE

DD FORM 2844 TEST, 20010822 DRAFT — PREVIOUS EDITION IS OBSOLETE. NOTE: Print this form on brown colored paper.

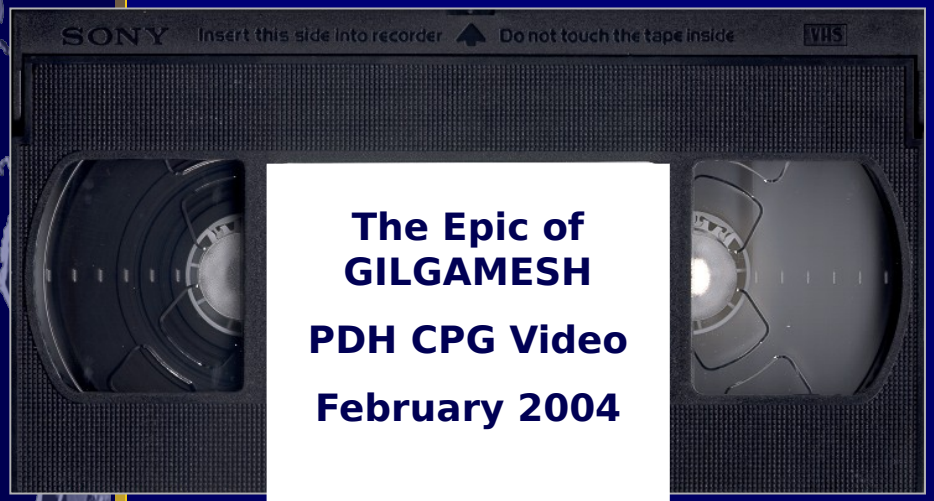
Provider Tools: Documentation Form

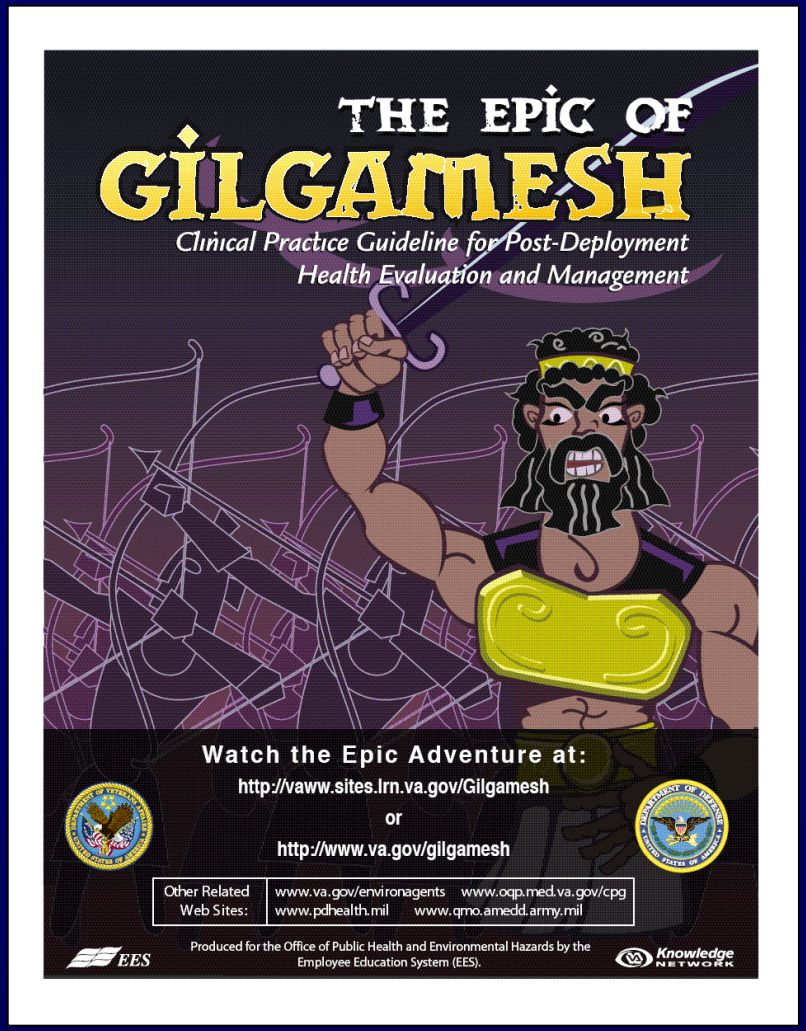
DD Form 2844 Test

MAR 2002

DoD/VA PDH CPG Tool Kit

Animated Videotape Soldier & Family Education





Video May be Reproduced

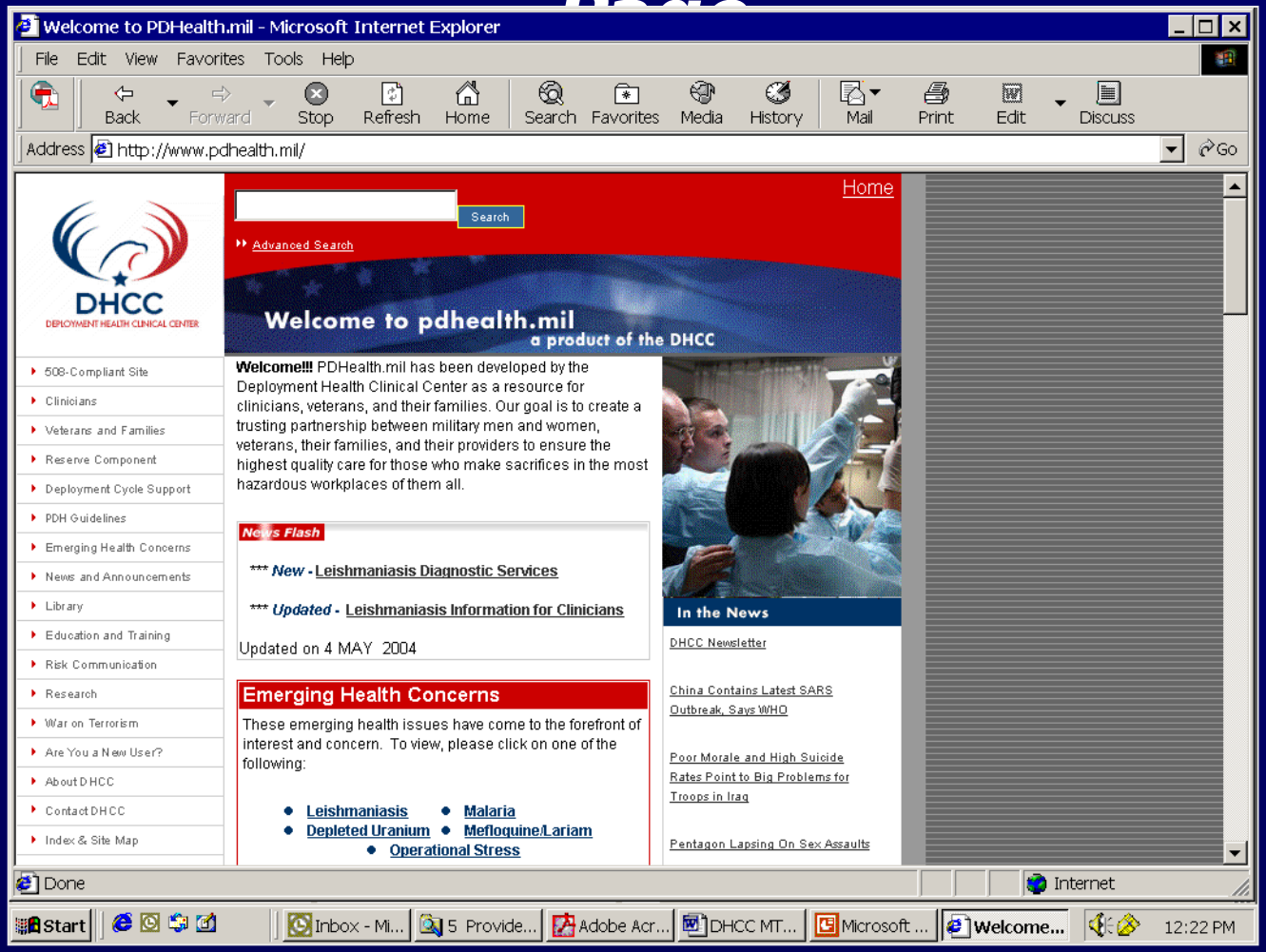
DoD/VA PDH CPG Tool Kit

Provider Tools: Metrics

- **Patient Satisfaction with care received for a post-deployment concern (s).**
- **Provider satisfaction with adequacy of information and resources to manage post- deployment care.**
- **Percentage of personnel with referral for post-deployment healthcare who had at least one visit.**
- **Improvement in functional status**

DoD/VA PDH CPG Tool Kit

Provider Tools: PDHealth.mil Website Home Page


Welcome to PDHealth.mil - Microsoft Internet Explorer
File Edit View Favorites Tools Help
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Address http://www.pdhealth.mil/
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DHCC
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Advanced Search
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508-Compliant Site
Clinicians
Veterans and Families
Reserve Component
Deployment Cycle Support
PDH Guidelines
Emerging Health Concerns
News and Announcements
Library
Education and Training
Risk Communication
Research
War on Terrorism
Are You a New User?
About DHCC
Contact DHCC
Index & Site Map
Welcome!!! PDHealth.mil has been developed by the Deployment Health Clinical Center as a resource for clinicians, veterans, and their families. Our goal is to create a trusting partnership between military men and women, veterans, their families, and their providers to ensure the highest quality care for those who make sacrifices in the most hazardous workplaces of them all.
News Flash
*** New - Leishmaniasis Diagnostic Services
*** Updated - Leishmaniasis Information for Clinicians
Updated on 4 MAY 2004
Emerging Health Concerns
These emerging health issues have come to the forefront of interest and concern. To view, please click on one of the following:
Leishmaniasis
Malaria
Depleted Uranium
Mefloquine/Lariam
Operational Stress
In the News
DHCC Newsletter
China Contains Latest SARS Outbreak, Says WHO
Poor Morale and High Suicide Rates Point to Big Problems for Troops in Iraq
Pentagon Lapsing On Sex Assaults
Done
Internet
Start
Inbox - Mi...
5 Provide...
Adobe Acr...
DHCC MT...
Microsoft ...
Welcome...
12:22 PM

DoD/VA PDH CPG Tool Kit

Provider Tools: Risk Communication PDHealth.mil Website

Risk Communications - Microsoft Internet Explorer
File Edit View Favorites Tools Help
Back Forward Stop Refresh Home Search Favorites Media History Mail Print Edit Discuss
Address http://www.pdhealth.mil/clinicians/risk_comm.asp
Go
DHCC
DEPLOYMENT HEALTH CLINICAL CENTER
Home
Search
Advanced Search
Risk Communication
508-Compliant Site
Clinicians
Veterans and Families
Reserve Component
Deployment Cycle Support
PDH Guidelines
Emerging Health Concerns
News and Announcements
Library
Education and Training
Risk Communication
Research
War on Terrorism
Are You a New User?
About DHCC
Contact DHCC
Index & Site Map
Help and FAQs
COMMUNICATING DEPLOYMENT-RELATED HEALTH CONCERNS TO PATIENTS
One of the more commonly addressed issues of patient-clinician interaction is the skill with which physicians communicate bad news to patients. Probably more common for most physicians, however, is the need to effectively convey reassuring information when the available medical evaluation suggests the absence of a catastrophic or rapidly progressive problem. This process is known as risk communication. It is the science of communicating information about risk under circumstances involving some combination of low trust, high concern, perceived crisis, or differential interpersonal power.
Nearly all clinicians regularly encounter patients under conditions of high concern, low trust, perceived crisis or differential interpersonal power. Clinicians can learn to improve their capacity for effective doctor-patient communication about risk, disease, and prognosis from the burgeoning literature on risk communication.
We've gathered a few documents that we hope will help you learn how to effectively communicate deployment-related
In the News
China Contains Latest SARS Outbreak, Says WHO
Poor Morale and High Suicide Rates Point to Big Problems for Troops in Iraq
Pentagon Lapsing On Sex Assaults
Exam Room Comedy Best Used with Caution
Done
Internet
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Inbox - ...
5 Provi...
Adobe ...
DHCC ...
Microso...
Risk C...
Docum...
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Provider Tools:

Miscellaneous

- **Clinical Risk Communication Training on PDHealth Website (Health-E VOICE)**
- **Reference Book: “Chronic Illness and Uncertainty”**
- **Peer Review Audit Form**

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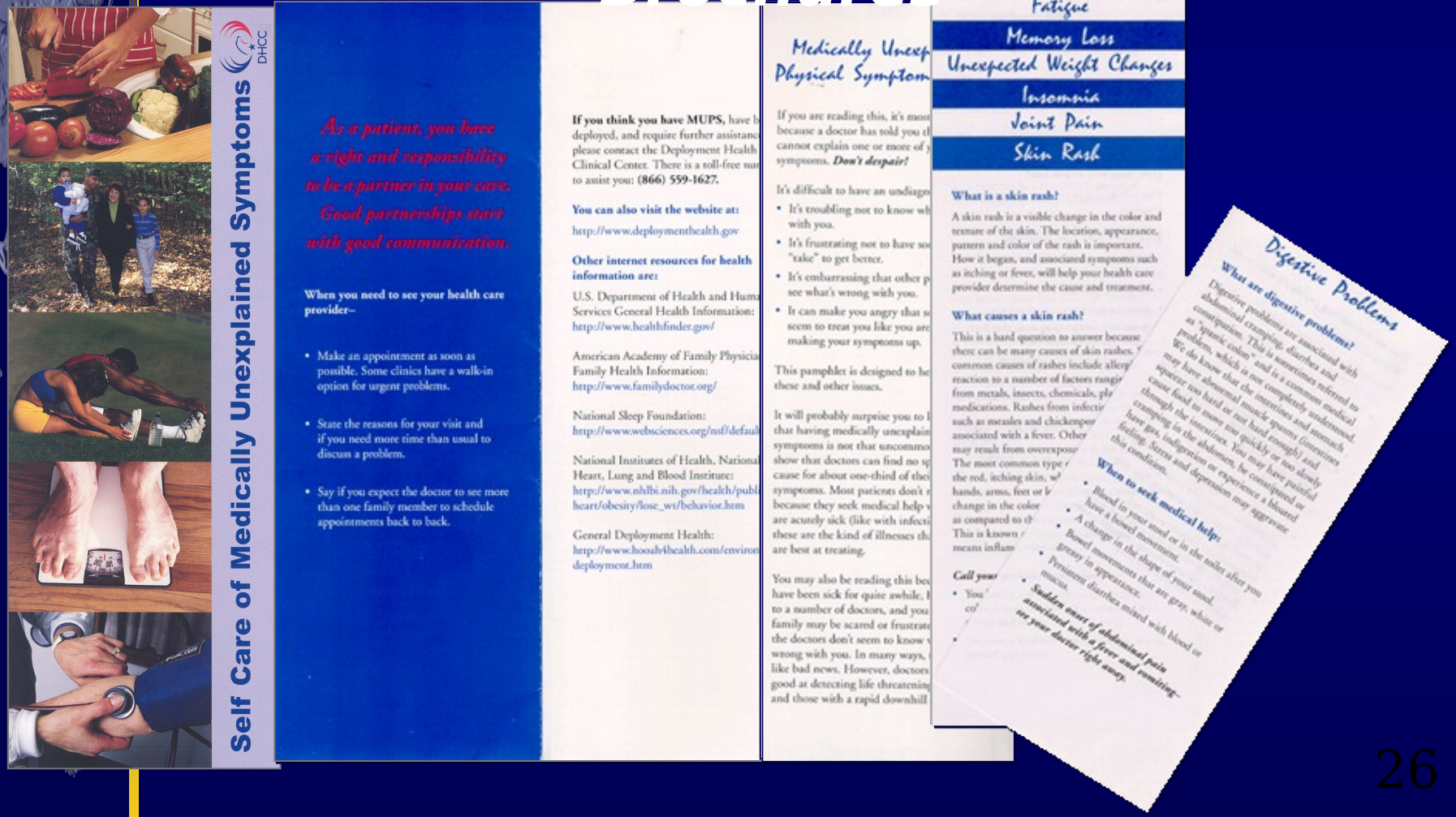
Patient Tools: Medically Unexplained Symptoms Brochures


Self Care of Medically Unexplained Symptoms
DHCC
As a patient, you have a right and responsibility to be a partner in your care. Good partnerships start with good communication.
When you need to see your health care provider–
Make an appointment as soon as possible. Some clinics have a walk-in option for urgent problems.
State the reasons for your visit and if you need more time than usual to discuss a problem.
Say if you expect the doctor to see more than one family member to schedule appointments back to back.
If you think you have MUPS, have b
deployed, and require further assistanc
please contact the Deployment Health
Clinical Center. There is a toll-free nu
to assist you: (866) 559-1627.
You can also visit the website at:
http://www.deploymenthealth.gov
Other internet resources for health information are:
U.S. Department of Health and Huma
Services General Health Information:
http://www.healthfinder.gov/
American Academy of Family Physicia
Family Health Information:
http://www.familydoctor.org/
National Sleep Foundation:
http://www.websciences.org/nsf/defaul
National Institutes of Health, National
Heart, Lung and Blood Institute:
http://www.nhlbi.nih.gov/health/publ
heart/obesity/lose_wt/behavior.htm
General Deployment Health:
http://www.hooahhealth.com/enviro
deployment.htm
Medically Unexp
Physical Symptom
If you are reading this, it's most
because a doctor has told you t
cannot explain one or more of
symptoms. Don't despair!
It's difficult to have an undiagn
It's troubling not to know wh
with you.
It's frustrating not to have so
"take" to get better.
It's embarrassing that other p
see what's wrong with you.
It can make you angry that s
seem to treat you like you are
making your symptoms up.
This pamphlet is designed to he
these and other issues.
It will probably surprise you to l
that having medically unexplain
symptoms is not that uncommo
show that doctors can find no sp
cause for about one-third of thei
symptoms. Most patients don't r
because they seek medical help
are acutely sick (like with infecti
these are the kind of illnesses th
are best at treating.
You may also be reading this bo
have been sick for quite awhile, h
to a number of doctors, and you
family may be scared or frustrat
the doctors don't seem to know
wrong with you. In many ways,
like bad news. However, doctors
good at detecting life threatenin
and those with a rapid downhill
Headaches
Fatigue
Memory Loss
Unexpected Weight Changes
Insomnia
Joint Pain
Skin Rash
What is a skin rash?
A skin rash is a visible change in the color and texture of the skin. The location, appearance, pattern and color of the rash is important. How it began, and associated symptoms such as itching or fever, will help your health care provider determine the cause and treatment.
What causes a skin rash?
This is a hard question to answer because there can be many causes of skin rashes. common causes of rashes include allerg reaction to a number of factors rangi from metals, insects, chemicals, ph medications. Rashes from infecti such as measles and chickenpox associated with a fever. Other may result from overexpose The most common type the red, itching skin, w hands, arms, feet or l change in the color as compared to th This is known means inflam
Call your
You co
Digestive Problems
What are digestive problems?
Digestive problems are associated with abdominal cramping, diarrhea and constipation. This is sometimes referred to as "spastic colon" and is a common medical problem, which is not completely understood. We do know that the intestines and stomach may have abnormal muscle spasms (intestines squeeze too hard or not hard enough) and squeeze too slowly or too quickly. This may cause food to move too quickly or too slowly through the intestines. You may have painful cramping in the abdomen, be constipated or have gas, indigestion or experience a bloated feeling. Stress and depression may aggravate this condition.
When to seek medical help:
Blood in your stool or in the toilet after you have a bowel movement.
A change in the shape of your stool.
Bowel movements that are gray, white or greasy in appearance.
Persistent diarrhea mixed with blood or mucus.
Sudden onset of abdominal pain associated with a fever and vomiting– see your doctor right away.

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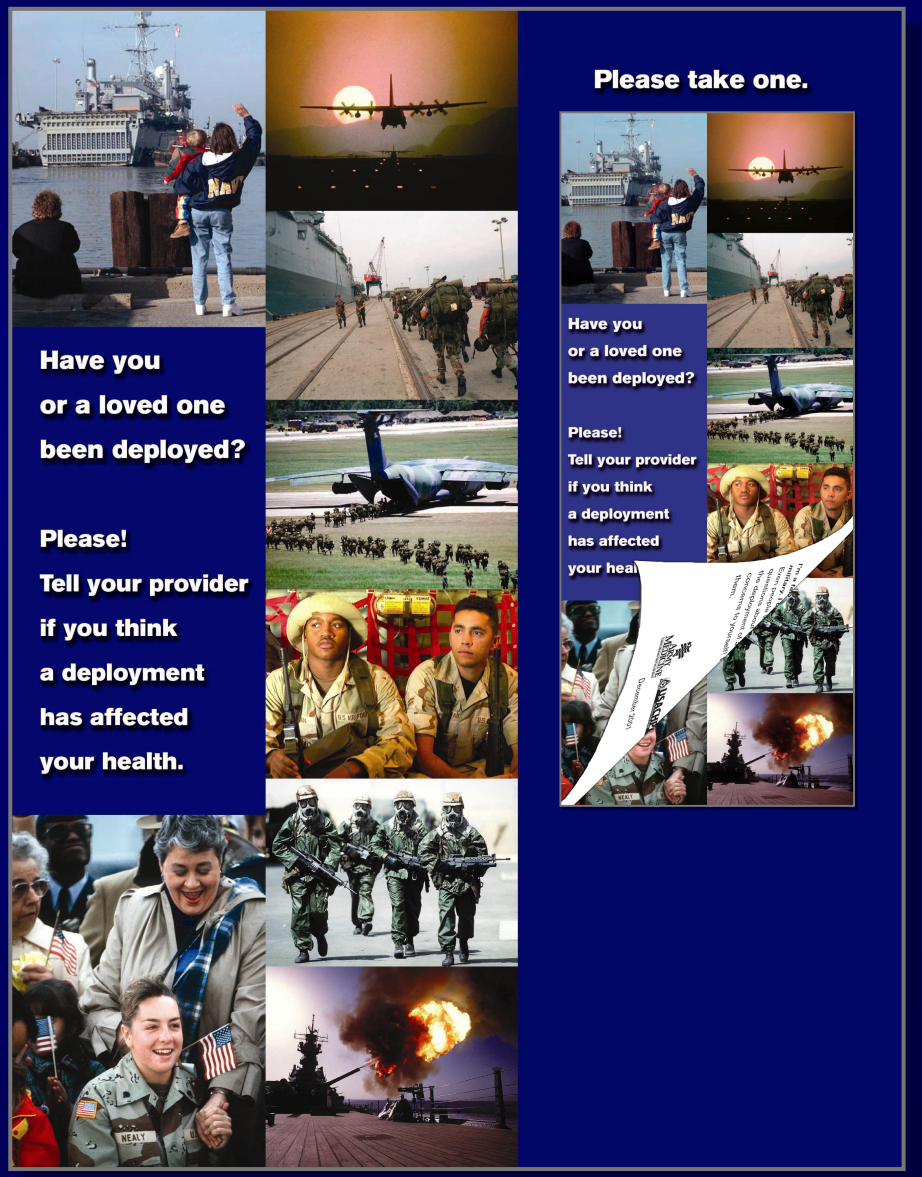
Patient Tools: Brochures



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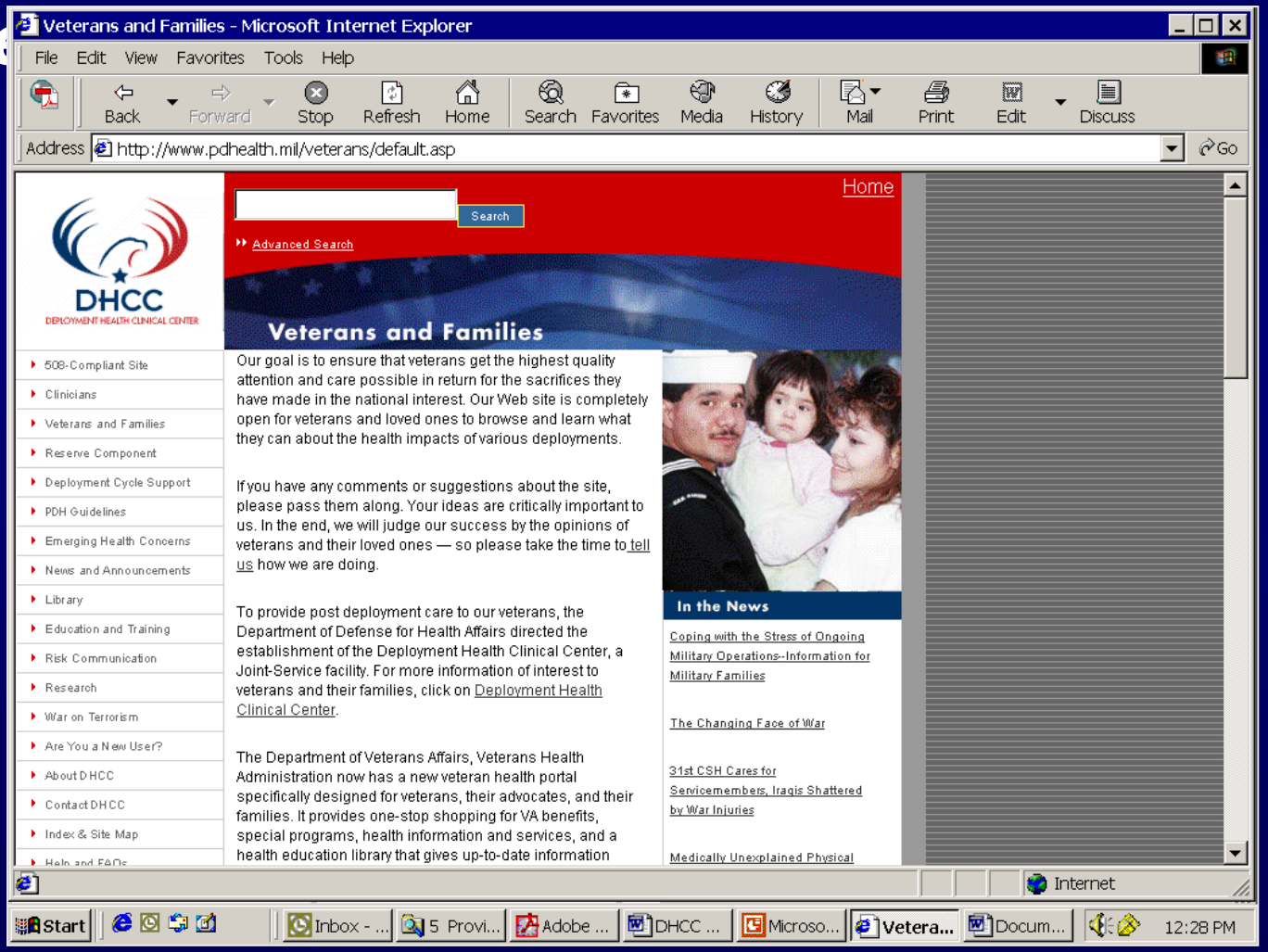
Veterans and Family Tools: PDHealth.mil

We


Veterans and Families - Microsoft Internet Explorer
File Edit View Favorites Tools Help
Back Forward Stop Refresh Home Search Favorites Media History Mail Print Edit Discuss
Address http://www.pdhealth.mil/veterans/default.asp
Go
DHCC
DEPLOYMENT HEALTH CLINICAL CENTER
Home
Search
Advanced Search
Veterans and Families
508-Compliant Site
Clinicians
Veterans and Families
Reserve Component
Deployment Cycle Support
PDH Guidelines
Emerging Health Concerns
News and Announcements
Library
Education and Training
Risk Communication
Research
War on Terrorism
Are You a New User?
About DHCC
Contact DHCC
Index & Site Map
Help and FAQs
Our goal is to ensure that veterans get the highest quality attention and care possible in return for the sacrifices they have made in the national interest. Our Web site is completely open for veterans and loved ones to browse and learn what they can about the health impacts of various deployments.
If you have any comments or suggestions about the site, please pass them along. Your ideas are critically important to us. In the end, we will judge our success by the opinions of veterans and their loved ones — so please take the time to tell us how we are doing.
To provide post deployment care to our veterans, the Department of Defense for Health Affairs directed the establishment of the Deployment Health Clinical Center, a Joint-Service facility. For more information of interest to veterans and their families, click on Deployment Health Clinical Center.
The Department of Veterans Affairs, Veterans Health Administration now has a new veteran health portal specifically designed for veterans, their advocates, and their families. It provides one-stop shopping for VA benefits, special programs, health information and services, and a health education library that gives up-to-date information
In the News
Coping with the Stress of Ongoing Military Operations--Information for Military Families
The Changing Face of War
31st CSH Cares for Servicemembers, Iraqis Shattered by War Injuries
Medically Unexplained Physical
Internet
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DHCC ...
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Marketing Tool: Poster

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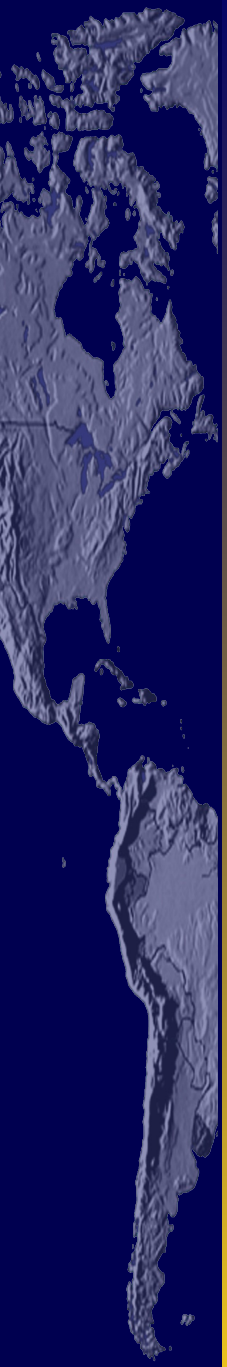
Ancillary and System Tools



- **Technician/Screener Information Card**
- **Instructions for placing question onto modifiable CHCS SF600**
- **Instructions for developing a KG-ADS selection list for Deployment Health**
- **Peer Review Audit Form**

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Resources - Downloadable from Web:

- PDH and MUS Clinical Practice Guideline
- All questionnaires (PHQ, PHQ-Brief, SF-12, SF-36, PTSD checklist, Sleep Disorder)
- All provider and patient tools
- Slide Presentations

www.QMO.amedd.army.mil

www.PDHealth.mil

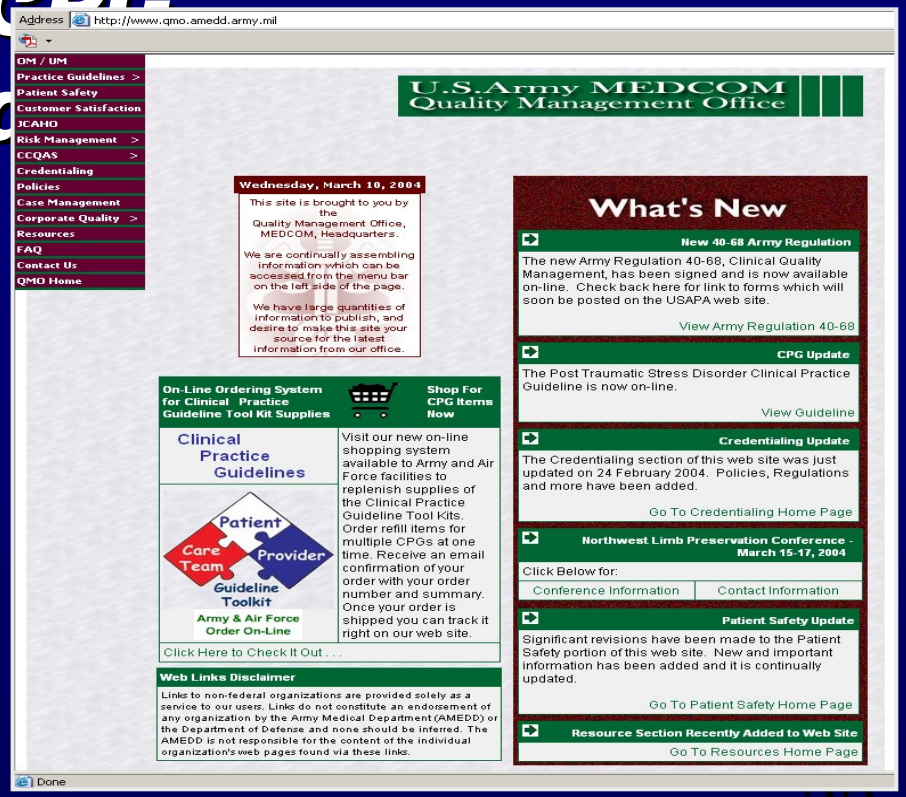
DoD/VA PDH CPG Tool Kit

Where Do I Obtain and Reorder Post-Deployment Health CPG

- At the MEDCOM Web Site:

www.QMO.amedd.army.mil

- Links to VA, AF, and Navy
- POCs for tool kit and tool kit material reordering


Address http://www.qmo.amedd.army.mil
OM / UM
Practice Guidelines >
Patient Safety
Customer Satisfaction
JCAHO
Risk Management >
CCQAS >
Credentialing
Policies
Case Management
Corporate Quality >
Resources
FAQ
Contact Us
QMO Home
U.S.Army MEDCOM Quality Management Office
Wednesday, March 10, 2004
This site is brought to you by the Quality Management Office, MEDCOM, Headquarters.
We are continually assembling information which can be accessed from the menu bar on the left side of the page.
We have large quantities of information to publish, and desire to make this site your source for the latest information from our office.
What's New
New 40-68 Army Regulation
The new Army Regulation 40-68, Clinical Quality Management, has been signed and is now available on-line. Check back here for link to forms which will soon be posted on the USAPA web site.
View Army Regulation 40-68
CPG Update
The Post Traumatic Stress Disorder Clinical Practice Guideline is now on-line.
View Guideline
Credentialing Update
The Credentialing section of this web site was just updated on 24 February 2004. Policies, Regulations and more have been added.
Go To Credentialing Home Page
Northwest Limb Preservation Conference - March 15-17, 2004
Click Below for:
Conference Information
Contact Information
Patient Safety Update
Significant revisions have been made to the Patient Safety portion of this web site. New and important information has been added and it is continually updated.
Go To Patient Safety Home Page
Resource Section Recently Added to Web Site
Go To Resources Home Page
On-Line Ordering System for Clinical Practice Guideline Tool Kit Supplies
Shop For CPG Items Now
Clinical Practice Guidelines
Patient Care Team Provider
Guideline Toolkit
Army & Air Force Order On-Line
Visit our new on-line shopping system available to Army and Air Force facilities to replenish supplies of the Clinical Practice Guideline Tool Kits. Order refill items for multiple CPGs at one time. Receive an email confirmation of your order with your order number and summary. Once your order is shipped you can track it right on our web site.
Click Here to Check It Out . . .
Web Links Disclaimer
Links to non-federal organizations are provided solely as a service to our users. Links do not constitute an endorsement of any organization by the Army Medical Department (AMEDD) or the Department of Defense and none should be inferred. The AMEDD is not responsible for the content of the individual organization's web pages found via these links.
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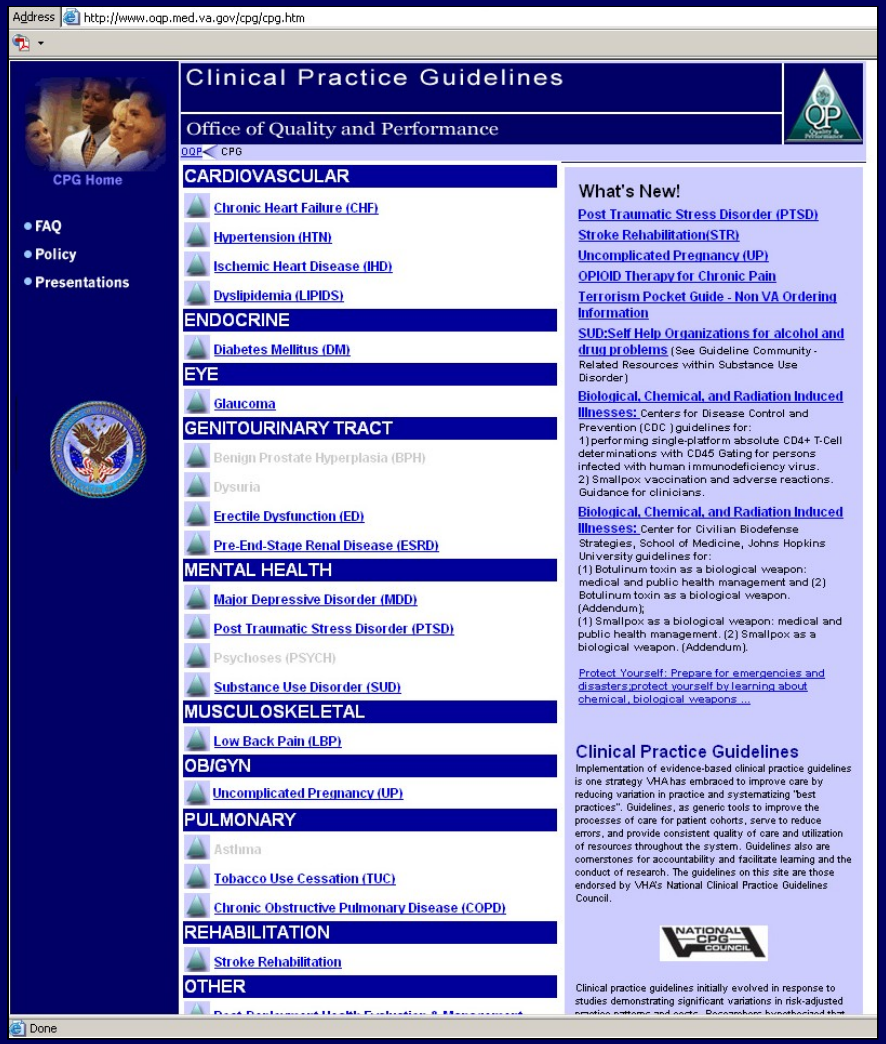
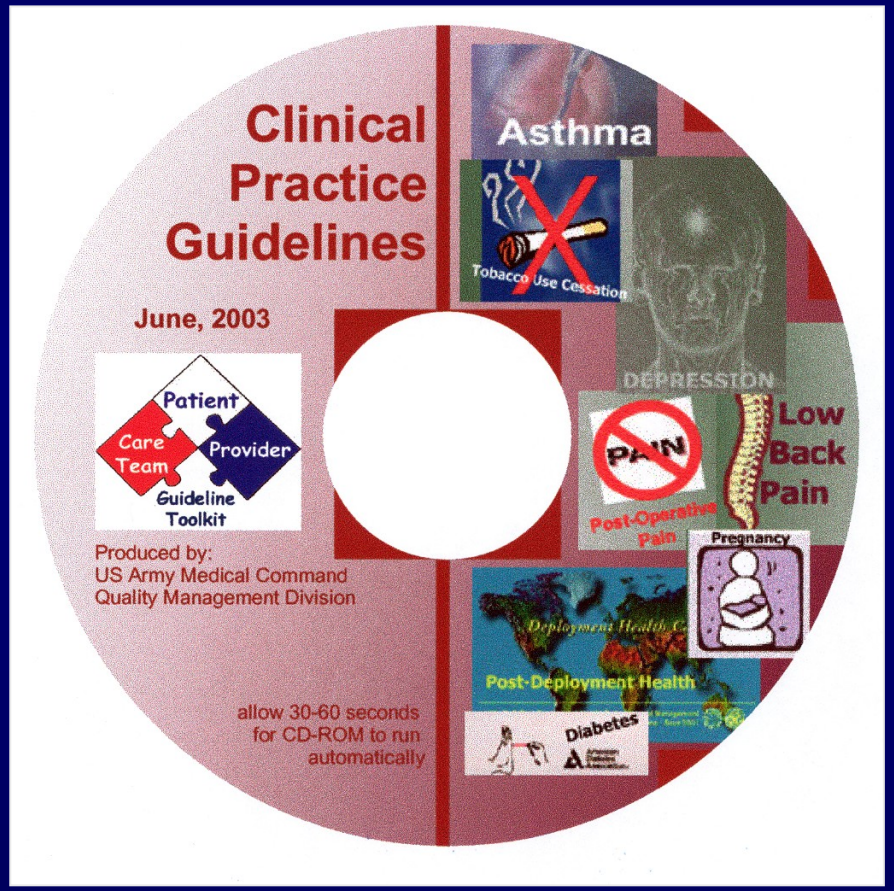
VA CPG Web Site


Address http://www.oqp.med.va.gov/cpg/cpg.htm
Clinical Practice Guidelines
Office of Quality and Performance
OQP CPG
CPG Home
FAQ
Policy
Presentations
CARDIOVASCULAR
Chronic Heart Failure (CHF)
Hypertension (HTN)
Ischemic Heart Disease (IHD)
Dyslipidemia (LIPIDS)
ENDOCRINE
Diabetes Mellitus (DM)
EYE
Glaucoma
GENITOURINARY TRACT
Benign Prostate Hyperplasia (BPH)
Dysuria
Erectile Dysfunction (ED)
Pre-End-Stage Renal Disease (ESRD)
MENTAL HEALTH
Major Depressive Disorder (MDD)
Post Traumatic Stress Disorder (PTSD)
Psychoses (PSYCH)
Substance Use Disorder (SUD)
MUSCULOSKELETAL
Low Back Pain (LBP)
OB/GYN
Uncomplicated Pregnancy (UP)
PULMONARY
Asthma
Tobacco Use Cessation (TUC)
Chronic Obstructive Pulmonary Disease (COPD)
REHABILITATION
Stroke Rehabilitation
OTHER
What's New!
Post Traumatic Stress Disorder (PTSD)
Stroke Rehabilitation(STR)
Uncomplicated Pregnancy (UP)
OPIOID Therapy for Chronic Pain
Terrorism Pocket Guide - Non VA Ordering Information
SUD:Self Help Organizations for alcohol and drug problems (See Guideline Community - Related Resources within Substance Use Disorder)
Biological, Chemical, and Radiation Induced Illnesses: Centers for Disease Control and Prevention (CDC) guidelines for:
1) performing single-platform absolute CD4+ T-Cell determinations with CD45 Gating for persons infected with human immunodeficiency virus.
2) Smallpox vaccination and adverse reactions.
Guidance for clinicians.
Biological, Chemical, and Radiation Induced Illnesses: Center for Civilian Biodefense Strategies, School of Medicine, Johns Hopkins University guidelines for:
(1) Botulinum toxin as a biological weapon: medical and public health management and (2) Botulinum toxin as a biological weapon. (Addendum);
(1) Smallpox as a biological weapon: medical and public health management. (2) Smallpox as a biological weapon. (Addendum).
Protect Yourself: Prepare for emergencies and disasters:protect yourself by learning about chemical, biological weapons ...
Clinical Practice Guidelines
Implementation of evidence-based clinical practice guidelines is one strategy VHA has embraced to improve care by reducing variation in practice and systematizing "best practices". Guidelines, as generic tools to improve the processes of care for patient cohorts, serve to reduce errors, and provide consistent quality of care and utilization of resources throughout the system. Guidelines also are cornerstones for accountability and facilitate learning and the conduct of research. The guidelines on this site are those endorsed by VHA's National Clinical Practice Guidelines Council.
NATIONAL CPG COUNCIL
Clinical practice guidelines initially evolved in response to studies demonstrating significant variations in risk-adjusted
Done

www.oqp.med.va.gov/cpg/cpg.ht

DoD/VA PDH CPG Tool Kit

This CD contains information about all the VA/DoD Clinical Practice Guideline documents and materials that are found on the USA MEDCOM CPG Web Site.



This CD-ROM may be